
Name



Medical Self-Assessment

Disclosure of health conditions is **voluntary**, but having information about pre-existing health conditions will enable the study abroad program staff to help you obtain proper medical assistance in the case of an accident or illness. In addition, your program director can help pre-arrange medical personnel for consultation overseas. Language barriers and incomplete medical records can delay treatment. While you are abroad, it is important that you continue any medical treatment or medication that you are currently receiving. We recommend that students with chronic health or mental health conditions discuss their participation in a study abroad program with their health care providers.

Are you currently receiving, or have you recently received any medical or psychological care of which you want us to be aware in case of an emergency? If so, describe fully.

List any other on-going physical or emotional conditions which might require treatment abroad, or that might be exacerbated by changes in the environment, diet and exercise. What treatment is recommended?

What medications are you taking on an ongoing basis? _____

Reminder: Bring enough medication to cover you for your time abroad plus one extra week.

What medications or other substances are you allergic to? _____

Are you on a medically restricted diet? If so, give details. _____

Do you have a physician who should be consulted in case of an emergency? If so, list name and phone number.

Decline to Complete Form

I decline to complete this form and do not wish to share any medical information with the study abroad program.

Signature (parental signature if under 18)

Date